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Application or Docking Number _____

Substitute for Form PTO-875

Application or Docket Number
10523844

SMALL ENTITY

(Column 1)

(Column 2)

OR

**OTHER THAN
SMALL ENTITY**

* if the difference in column 1 is less than zero, enter "U" in column 2.

pre-amended
2-7-05

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

AIMS AS AMENDED - PART II

(Column 1)

{Column 2}

(Column 3)

SMALL ENTITY

6

**OTHER THAN
SMALL ENTITY**

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.103)

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.101)

2 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.140)

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" ON THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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